

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	yer	1030	2/27/01 6-25-01
RESPONSE FORMALITY REVIEW	pm	-781	10-02-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Date
Final	
Original	
1	11/10/01
2	03/22/02
3	11/02/02
4	=
5	=
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	=
18	=
19	=
20	=
21	✓
22	✓
23	✓
24	✓
25	✓
26	✓
27	=
28	=
29	=
30	=
31	✓
32	✓
33	✓
34	✓
35	✓
36	✓
37	=
38	✓
39	✓
40	✓
41	-
42	-
43	-
44	-
45	✓
46	=
47	✓
48	✓
49	=
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Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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 RE
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10-02-0

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